## DUE DATE <br> FEBRUARY 12, 2008

Mail your completed form to:
U.S. CENSUS BUREAU

1201 East 10th Street Jeffersonville, IN 47134-0001

Please read the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

Visit www.census.gov/econhelp
Call 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

- OR -

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

## AS-56104

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same Iaw, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ballpoint pen. • Please center numbers in their respective boxes. Examples:
- Do not use pencil or felt-tip pen. - Do not put slashes through 0 or 7
- Place an "X" inside the box.

The reporting unit for this form is an establishment. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

## EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021Yes - Go to 20022No - Enter current EIN (9 digits) $\qquad$ $\rightarrow 0025$ $\square$
2 PHYSICAL LOCATION
A. Is this establishment's physical location the same as shown in the mailing address?
(P.O. Box and rural route addresses are not physical locations.)

0031Yes - Go to line B

00320035 Number and street
B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? (Mark "X" only ONE box.)
$0041 \square$ Yes $0042 \square$ No $\quad 0043 \square$ No legal boundaries $0044 \square$ Do not know
C. In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

City, village, or borough
$0047 \quad \square$ Town or township
0048Other
0024
Do not know

OPERATIONAL STATUS
Which ONE of the following best describes this establishment's operational status at the end of 2007?
(Mark "X" only ONE box.)


| 0060 Name of new owner or operator | 0061 EIN (9 digits) |  |  |
| :--- | :--- | :--- | :--- |
|  |  | - |  |
| 0062 Mailing address (Number and street P O Box, etc.) |  |  |  |

0062 Mailing address (Number and street, P.O. Box, etc.)

| 0063 City, town, village, etc. | 0064 State | 0065 ZIP Code |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  | - |  |

0016
Other - Specify $\qquad$
MONTHS IN OPERATION

|  | Mark "X" | 2007 |
| :--- | :--- | :--- |
|  |  |  |

if None
Number
Number of months in operation during 2007 (If none, mark "X" and go to 30.)


Not Applicable.
7 EMPLOYMENT AND PAYROLL

## Include:

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in 1.


## Exclude:

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.

For further clarification, see information sheet(s).
A. Number of employees for pay period including March 12 .
B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

1. Annual payroll

0300
2. First quarter payroll (January-March, 2007)

0310

| $\begin{aligned} & \text { Mark "X" } \\ & \text { if None } \end{aligned}$ |  | 2007 |  |
| :---: | :---: | :---: | :---: |
|  |  | Number |  |
| 0320 |  |  |  |
| 2007 |  |  |  |
| \$ Bil. | Mil. | Thou. | Dol. |
|  |  |  |  |
|  |  |  |  |

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.
## Not Applicable.

KIND OF BUSINESS OR ACTIVITY
Which ONE of the following best describes this establishment's principal kind of business or activity in 2007? (Mark "X" only ONE box.)

## Investigation services

$561611001 \quad \square$ Detective agencies
$561611002 \quad \square$ Investigative services
$561611005 \square$ Pre-employment screening, including background checks

## Guard and armored car services

| 561612001 | $\square$ | Security guard services |
| :--- | :--- | :--- |
| 561612002 | $\square$ | Bodyguard services |
| 561612003 | $\square$ | Protective services |
| 561612007 | $\square$ | Crowd control services |
| 561612004 | $\square$ | Guard dog services |
| 561613001 | $\square$ | Armored car services |

## Security systems services

$561621001 \quad \square$ Security system services - sales along with installation, maintenance, or monitoring (Include fire and burglar alarm systems.)
$561621002 \quad \square$ Security systems contract monitoring services
$334290001 \quad \square$ Manufacturer of alarm systems
$238210006 \quad \square$ Security systems installation contractor - no equipment, sales, or monitoring services provided

## Locksmith services

$561622001 \quad \square$ Lock installation, repair, rebuilding, or adjusting services, with or without sales of locking devices
$811490906 \quad \square$ Key duplication services, excluding lock repair and installation

## Other kind of business or activity

| 561491001 | $\square$ | Repossession services |
| :--- | :--- | :--- |
| 561440005 | $\square$ | Debt collection services |
| 777560003 | $\square$ | Other security and investigative services - Specify |Other kind of business or activity - Specify

## CLASS OF CUSTOMER <br> Estimate the percentage of receipts (reported in (5) by class of customer.

| 2007 |  |
| :--- | :--- |
| $\begin{array}{c}\text { Whole percent } \\ \text { of receipts }\end{array}$ |  |
|  |  |
|  | $\%$ |
|  | $\%$ |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | 0 |$)$

2007
Whole percent of receipts

Was this establishment primarily engaged in providing management, administrative, or support services to other establishments of your enterprise (rather than for the general public or other business firms) in 2007?

## SUPPORT SERVICES

0998
Yes
0999
No

## 6. TOTAL

1. Business firms and farms3108
2. Not-for-profit organizations (Include religious organizations). ..... 31073. Federal government3105
3. State and local governments ..... 3106
4. Individuals (Include receipts from individually owned businesses on line 1.) ..... 3100

HOW TO
REPORT
PERCENTS

If figure is $\mathbf{3 8 . 7 6 \%}$ of total sales:

Report whole percents

| 2007 |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Estimates are acceptable. <br> Report dollars OR percents. |  |  |  |  |  |
| \$ Bil. | Mil. | Thou. | Dol. | Percent |  |
|  |  |  |  | 3 |  |

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE
(Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in (5). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipts lines.)
Line 1 - Report receipts from providing a systematic inquiry, examination, or analysis of people, events, or documents to determine the facts of a given situation. The evaluation is submitted in the form of a report or provided as a testimony in legal proceedings. Different techniques may be used to gather the information, such as surveillance, background check, computer searches, fingerprinting, lie detector services, or interviewing.

Line 1d - Report receipts from investigation of corporate theft/fraud, workplace threat assessment, identity theft, Internet fraud, or bank fraud.

Line 2 - Report receipts from providing protection of people and property using guards and patrols. May include dog security. Include providing access control at a property's entrance and vehicle gates by ensuring that employees and visitors display proper identification before entering the facility. Patrol officers may also provide protection to an establishment by driving in clearly marked vehicles to prevent and detect criminal activity, along with other safetyrelated issues. Include remote monitoring services performed by security guard and patrol personnel, surveillance by video camera (i.e., at a casino), and passenger screening services provided by security guards. Report protecting people using escorts and bodyguards on line 3.

Line 4 - Report receipts from providing armored car transportation of cash and valuables, automated teller machine services, and other armored car services. Include cash management and handling services bundled with armored car services. Include mobile security escort services (i.e., providing an escort vehicle to accompany trucks and other vehicles). Report protecting people using personal escorts and bodyguards on line 3. Report cash management and handling services, not bundled with armored car services on line 13.

Line 4b - Report receipts from providing services, such as cash replenishment and settlement, deposit collection, balancing of machines, replenishment of paper supplies, etc., for the appropriate operation of automated teller machines (ATMs). Include receipts from maintenance of ATMs.
Line 5 - Report receipts from the installation, maintenance, and monitoring of security systems. Include receipts from sales, leases, and repair. Include remote monitoring services by video camera. Exclude vehicle tracking and monitoring services; and emergency police, fire, and ambulance dispatch services.
Line 6 - Report receipts from the sale or lease, along with installation and repair, of building lock and security systems, without monitoring services. Include unlocking services, re-keying and re-coding of locks, and maintenance of safes and vaults. Report installation and/or repair of building security systems, bundled with monitoring services on the appropriate detail lines under line 5.
Line 11 - Report receipts from providing protection for facilities, both residential and non-residential buildings, by means of applying a defensive covering to withstand the impact of fire arms and other attack weapons.

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

> Description of sales, shipments, receipts, or revenue

1. Investigation services
a. Domestic and family investigation services
b. Legal investigation services
c. Insurance investigation services
d. Corporate investigation services
e. Other investigation services - Specify

## f. Sum lines 1 a through $1 e$

2. Security guard and patrol services
a. Security guard and patrol services in buildings
b. Security services in special events, including crowd control
c. Sum lines 2a and 2b
3. Bodyguard services
4. Armored car services
a. Armored car transportation of cash and valuables
b. Automated teller machine services
c. Other armored car services - Specify
d. Sum lines $\mathbf{4 a}$ through 4c
5. Building security system services (with monitoring)
a. Residential security system services
b. Non-residential security system services
c. Sum lines 5a and 5b

| Census use | 2007 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Estimates are acceptable. Report dollars OR percents. |  |  |  |  |
|  | \$ Bil. | Mil. | Thou. | Dol. | $$ |
| 0720 | 0721 |  |  |  |  |
| 33101 |  |  |  |  |  |
| 33102 |  |  |  |  |  |
| 33103 |  |  |  |  |  |
| 33104 |  |  |  |  |  |
| 33105 |  |  |  |  |  |
| 33100 |  |  |  |  |  |
| 33301 |  |  |  |  |  |
| 33302 |  |  |  |  |  |
| 33300 |  |  |  |  |  |
| 33310 |  |  |  |  |  |
| 33321 |  |  |  |  |  |
| 33322 |  |  |  |  |  |
| 33323 |  |  |  |  |  |
| 33320 |  |  |  |  |  |
| 33331 |  |  |  |  |  |
| 33332 |  |  |  |  |  |
| 33330 |  |  |  |  |  |

Description of sales, shipments, receipts, or revenue
6. Building security system and lock installation, including repair services (without monitoring)
a. Residential
b. Non-residential
c. Sum lines 6a and 6b
7. Key duplication services
8. Security consulting services
9. Security training services
10. Rental and leasing of locks, security systems, safes, and other equipment
11. Building armoring services (adding features to improve security by installing bullet proof glass, blast resistant covering, etc.)
12. Vehicle armoring services (adding features to improve security by installing bullet proof glass, armor plating, etc.)
13. Cash handling and management products
14. Resale of merchandise, over-the-counter or separate from services provided - Specify
$\qquad$
15. All other operating receipts - Specify if more than 10 percent of total receipts
16. TOTAL OPERATING RECEIPTS - Sum of lines should equal 5 if reporting in dollars

| $\begin{array}{\|l} \text { Cen- } \\ \text { sus } \\ \text { use } \end{array}$ | 2007 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Estimates are acceptable. Report dollars OR percents. |  |  |  |  |
|  | \$ Bil. | Mil. | Thou. | Dol. | $$ |
| 0720 | 0721 |  |  |  |  |
| 33341 |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| 33342 |  |  |  |  |  |
| 33340 |  |  |  |  |  |
| 33350 |  |  |  |  |  |
| 33360 |  |  |  |  |  |
| 33370 |  |  |  |  |  |
| 39508 |  |  |  |  |  |
| 33390 |  |  |  |  |  |
| 33400 |  |  |  |  |  |
| 33410 |  |  |  |  |  |
| 39642 |  |  |  |  |  |
| 39741 |  |  |  |  |  |
| 39850 |  |  |  |  | 100 |

and 24 Not Applicable.

## EXPORTED SERVICES

NOTE - An exported service is a product (e.g., service performed, license agreement) that is performed for, or sold or transferred to, a customer or client (individual, government, business establishment, etc.) located outside the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Include products provided to unaffiliated and affiliated foreign firms (e.g., foreign parent firms, subsidiaries, branches). Exclude products provided to domestic subsidiaries of foreign firms.
A. Did the receipts or revenue (reported in (5) include any amounts for exported services?
0911 Yes - Go to line B
0912No - Go to
B. Amount of receipts or revenue for exported services

0914

| 2007 |  |  |  |
| :--- | :---: | :---: | :---: |
| \$ Bil. | Mil. | Thou. | Dol. |
|  |  |  |  |
|  |  |  |  |

# If not shown, please enter your 11-digit Census File 

 Number (CFN) from the mailing address.SPECIAL INQUIRIES
FRANCHISE
Was this establishment operating under a trademark authorized by a franchisor in 2007?
(Mark "X" only ONE box.)
0237Yes - franchisee owned establishment

0238Yes - franchisor owned establishment

0239No

## Not Applicable.

REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.
Is the time period covered by this report a calendar year?
No - Enter time period covered $\longrightarrow$
Name Yes iod covered by
$\square$

